Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Edward First name L. Middle name Johnson Last name and Suffix (Sr., Jr., II, III)	 Thelma First name A. Middle name Johnson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5410	xxx-xx-6704

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		2805 Blossom Drive Dover, PA 17315				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	York County		Owntr			
	•		County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Edward L. Johnson Debtor 2 Thelma A. Johnson Case number (if known)									
Par	t 2: Tell the Court About	t Your Ban	kruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chap	oter 7						
		☐ Chap	oter 11						
		☐ Chap	oter 12						
		☐ Chap	oter 13						
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your lo about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, corder. If your attorney is submitting your payment on your behalf, your attorney may pay with a a pre-printed address.				urself, you may pay with cash, cashier's check,	, or money		
						on, sign and attach the Application for Individual	Is to Pay		
The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty li					erty line that				
						n installments). If you choose this option, you mical Form 103B) and file it with your petition.	ust fill out		
9. Have you filed for bankruptcy within the		■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to I	ine 12.					
	residence:	☐ Yes.	Has yo	our landlord obtaine	ed an eviction judgment agains	t you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it a	s part of		

	otor 2 Edward L. Johnso Thelma A. Johnso				Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
If you have more than one sole proprietorship, use a separate sheet and attach				te & ZIP Code		
	it to this petition.		Chec		x to describe your business:	
					ness (as defined in 11 U.S.C. § 101(27A))	
				-	Estate (as defined in 11 U.S.C. § 101(51B))	
					efined in 11 U.S.C. § 101(53A))	
				-	er (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it car deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, followin 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs			diate attention is why is it needed?		
	immediate attention?		nocucu	y io it flooded:		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
	•				Number, Street, City, State & Zip Code	

Debtor 1 Edward L. Johnson
Debtor 2 Thelma A. Johnson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 2 Edward L. Johnso Thelma A. Johnso				Case nu	mber (if known)			
Par	t 6: Answer These Questi	ons for Re	porting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
			Are your debts primarily busi money for a business or investr						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c. -	State the type of debts you owe	e that are not consumer d	ebts or bus	iness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses	— 165.	I am filing under Chapter 7. Do are paid that funds will be avail: No	property is excluded and adminis tors?	trative expenses				
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 □ \$10,000,001 - \$5 □ \$50,000,001 - \$1 □ \$100,000,001 - \$	0 million 00 million	☐ \$500,000,001 - \$1 t ☐ \$1,000,000,001 - \$ ☐ \$10,000,000,001 - \$ ☐ More than \$50 billio	10 billion \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 □ \$10,000,001 - \$5 □ \$50,000,001 - \$1 □ \$100,000,001 - \$	0 million 00 million	□ \$500,000,001 - \$1 t □ \$1,000,000,001 - \$ □ \$10,000,000,001 - □ More than \$50 billio	10 billion \$50 billion		
Par	t 7: Sign Below								
For	you	I have exa	mined this petition, and I declar	re under penalty of perjur	y that the in	nformation provided is true and co	orrect.		
		If I have ch United Sta	nosen to file under Chapter 7, I ites Code. I understand the relie	am aware that I may prod ef available under each c	ceed, if eligi hapter, and	ible, under Chapter 7, 11,12, or 1	3 of title 11, oter 7.		
			ney represents me and I did not , I have obtained and read the r			s not an attorney to help me fill o).	ut this		
		I request r	elief in accordance with the cha	apter of title 11, United Sta	ates Code,	specified in this petition.			
			y case can result in fines up to S			ey or property by fraud in connect 20 years, or both. 18 U.S.C. §§ 1			
		/s/ Edwa	rd L. Johnson L. Johnson of Debtor 1	The	Thelma A elma A. Jo nature of De				
		Executed	on February 4, 2020 MM / DD / YYYY	Exe		February 4, 2020 MM / DD / YYYY			

Debtor 1	Edward L. Johnson		
Debtor 2	Thelma A. Johnson	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark A. Buterbaugh	Date	February 4, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Mark A. Buterbaugh		
Printed name		
Mooney Law		
Firm name		
230 York Street		
Hanover, PA 17331		
Number, Street, City, State & ZIP Code		
Contact phone (717) 632-4656	Email address	mab@mooney4law.com
306967 PA		
Bar number & State		

HIII	in this information to identify your case:		
	**		
Del	tor 1 Edward L. Johnson First Name Middle Name Last Name		
Del	tor 2 Thelma A. Johnson		
	use if, filing) First Name Middle Name Last Name		
Uni	ed States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA		
0			
	e number	- 0	
(if kr	own)	_	if this is an
		amend	ded filing
Of	ficial Form 106Sum		
Su	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info you	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	1: Summarize Your Assets	Your as	
		Value o	f what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$	7,000.00
	1a. Copy line 55, Total real estate, from Schedule A/B	Φ	1,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,481.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	36,481.00
Par	2: Summarize Your Liabilities		
· a	- Cummunity Four Elabinities		
			abilities t you owe
		, anoun	i you one
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	72,638.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
		· —	
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	66,255.73
	Your total liabilities	\$	138,893.73
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)		
٠.	Copy your combined monthly income from line 12 of Schedule I	\$	4,735.92
_	Schedule J: Your Expenses (Official Form 106J)		
5.	Copy your monthly expenses from line 22c of Schedule J	\$	3,637.26
Par	4: Answer These Questions for Administrative and Statistical Records		
_	A (1) () () () () () () ()		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	ur othor ook	odulos
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ui otner scr	ieuules.
	■ Yes		
7.	What kind of debt do you have?		
	Vous debte are primarily concumer debte. Consumer debte are those "incurred by an individual animarily for	a norocasi	family or
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	iaiilliy, Uí

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Official Form 106Sum

the court with your other schedules.

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1	Edward L. Johnson
Debtor 2	Thelma A. Johnson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,743.55

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Pebtor 2 The	elma A. Johnson	Aiddle Name Last Name Aiddle Name Last Name E DISTRICT OF PENNSYLVANIA		
Spouse, if filing) First United States Bankrupto Case number	Name M			
Case number	y Court for the: MIDDL	E DISTRICT OF PENNSYLVANIA		
Official Form 1				☐ Check if this is a amended filing
inolar i omi i	06A/B			
Schedule A	/B: Property	,		12/15
	/ legal or equitable interest	or Other Real Estate You Own or Have an Interest In in any residence, building, land, or similar property?	,	
1				
2805 Blossom D	Prive	What is the property? Check all that apply Single-family home	Do not deduct secured o	claims or exemptions. Put
2805 Blossom D Lot 3 Street address, if available		What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: iims Secured by Property.
Lot 3		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative ■ Manufactured or mobile home	the amount of any secur	ed claims on Schedule D:
Lot 3 Street address, if available	e, or other description PA 17315-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$7,000.00 Describe the nature of (such as fee simple, te	ed claims on Schedule D: hims Secured by Property. Current value of the portion you own? \$7,000.00 your ownership interest nancy by the entireties, o
Lot 3 Street address, if available	e, or other description PA 17315-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$7,000.00 Describe the nature of (such as fee simple, te	ed claims on Schedule D: hims Secured by Property. Current value of the portion you own? \$7,000.00 your ownership interest nancy by the entireties, o
Lot 3 Street address, if available Dover City	e, or other description PA 17315-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$7,000.00 Describe the nature of (such as fee simple, te	ed claims on Schedule D: iims Secured by Property. Current value of the portion you own? \$7,000.0 your ownership interest nancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte Debte		dward L. Johnson helma A. Johnson		Case number (if known)	
3. Ca	rs, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles		
	No				
	Yes				
3.1	Make:	Kia	Who has an interest in the property? Check one		red claims or exemptions. Put ecured claims on Schedule D:
	Model:	Sportage	Debtor 1 only	Creditors Who Have	e Claims Secured by Property.
	Year:	2019 6000	Debtor 2 only	Current value of th	
		nate mileage: 6000 ormation:	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
		ormation.	At least one of the deptors and another		
			☐ Check if this is community property (see instructions)	\$26,295. (\$26,295.00
3.2	Make: Model:	Open Range	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any s	red claims or exemptions. Put ecured claims on Schedule D: e Claims Secured by Property.
	Year:		Debtor 2 only		. , .
	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		
		Range Camper Being sed 2/4/20	☐ Check if this is community property (see instructions)	\$0.	90.00
.pa Part 3	ges you Descri	have attached for Part 2. Write be Your Personal and Household I	vn for all of your entries from Part 2, including a that number herethat number herethat number here tems	any entries for	\$26,295.00 Current value of the portion you own? Do not deduct secured
<i>E</i> >					claims or exemptions.
		Living Room: ((\$5); Lamp (\$5)	Couch (\$35); Bookcase (\$5); Two Chairs (\$	\$30); Table	\$80.00
		Refrigerator (\$ Dryer (\$15); Sto	(\$15); Four Chairs (\$20); Microwave (\$20) 30); Deep Freezer (\$30); Washing Machine ove (\$30); Dishes (\$10); Cookware (\$10); C na Closet (\$10); Silverware (\$2)	e (\$20);	\$217.00
		Bedroom: Bed Drawers (\$35);	(\$25); Chair (\$5); Two Dressers (\$10); Che Vanity (\$3)	est of	\$78.00

Debtor 2			(if known)
		Other Rooms: Vacuum Cleaner (\$10); Three Air Conditioners (\$30); Power Tools (\$20); Lawn Mower (\$200)	\$260.00
	mples: Televisions a including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	s; music collections; electronic devices
		Two Televisions (\$30); Radio (\$5); Stereo (\$10); VCR/DVD Player (\$5)	\$50.00
Exar	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stans, memorabilia, collectibles	amp, coin, or baseball card collections;
		Collectibles	\$20.00
■ No □ Ye 10. Fire Exa	musical instruction es. Describe parms amples: Pistols, rifles	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis iments s, shotguns, ammunition, and related equipment	; canoes and kayaks; carpentry tools;
		Shotgun	\$30.00
	amples: Everyday cl	Wearing Apparel Debtor (\$150) Wear Apparel Co-Debtor (\$150)	\$300.00
	amples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
		Jewelry	\$15.00
Exa	n-farm animals amples: Dogs, cats, o es. Describe	pirds, horses	
		Dog 4 years old Chipoo	\$0.00

Official Form 106A/B

Schedule A/B: Property

page 3

Best Case Bankruptcy

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	btor 1 btor 2	Edward L. Jo Thelma A. Jo			Case number	(if known)	
14.	Any otl ■ No	her personal and	d household items yo	u did not a	lready list, including any health aids you did	not list	
		Give specific info	ormation				
15					including any entries for pages you have atta	ached	\$1,050.00
		scribe Your Financ					
Do	you ow	n or have any le	egal or equitable inter	est in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No		ave in your wallet, in y		n a safe deposit box, and on hand when you file	your petition	
					Cash		\$95.00
	Examp □ No				certificates of deposit; shares in credit unions, b the same institution, list each. Institution name:	orokerage hou	ses, and other similar
			17.1. Checking		Member's 1st		\$0.00
			17.2. Checking		вв&т		\$2,041.00
18.	Examp		or publicly traded stoo investment accounts w		ge firms, money market accounts		
	■ No □ Yes		Institution or is	ssuer name	:		
19.	joint v		ock and interests in ir	ncorporate	d and unincorporated businesses, including	an interest ir	an LLC, partnership, and
	■ No □ Yes.	Give specific info	ormation about them Name of entity:		% of owners	ship:	
20.	Negoti	able instruments i	include personal check	ks, cashiers	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.		
	☐ Yes.	Give specific info	rmation about them Issuer name:				
	Retiren Examp	nent or pension bles: Interests in If	accounts RA, ERISA, Keogh, 40	1(k), 403(b)	, thrift savings accounts, or other pension or prof	fit-sharing pla	ns
	_	List each account	t separately. Type of account:		Institution name:		
			Pension		Northern Trust Company		\$0.00

	ebtor 1 ebtor 2	Edward L. Thelma A.				Case number (if known)	
22.	Your sh	are of all unu		u have made so that you m		from a company ecommunications companies,	or others
				Instit	tution name or individual:		
	Annuitie ■ No □ Yes		t for a periodic pa	ayment of money to you, ei d description.	ther for life or for a number	of years)	
24.		5. §§ 530(b)(1), 529A(b), and 5	529(b)(1).		qualified state tuition progra	m.
	☐ Yes		Institution name	and description. Separatel	y file the records of any int	erests.11 U.S.C. § 521(c):	
	■ No		future interests information about		nything listed in line 1), a	and rights or powers exercis	sable for your benefit
	Exampl ■ No	es: Internet d	lomain names, w	ade secrets, and other introduced from roy.		nents	
27.	License Example ■ No	s, franchise: es: Building p		neral intangibles e licenses, cooperative ass	ociation holdings, liquor lice	enses, professional licenses	
M	oney or p	roperty owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	inds owed to	•	t them, including whether y	ou already filed the returns	and the tax years	
	■ No	es: Past due	or lump sum alim	nony, spousal support, child	d support, maintenance, div	vorce settlement, property set	tlement
30.		<i>'es:</i> Unpaid w		nsurance payments, disabil u made to someone else	ity benefits, sick pay, vacat	tion pay, workers' compensat	ion, Social Security
	☐ Yes. (Give specific	information				
31.		s in insurand les: Health, di		surance; health savings acc	count (HSA); credit, homed	owner's, or renter's insurance	
	☐ Yes. N	lame the insu	urance company Compan	of each policy and list its va y name:	alue. Benefic	ciary:	Surrender or refund value:
32.	If you a			you from someone who hust, expect proceeds from a		re currently entitled to receive	property because
		Give specific	information				

Debtor 1 Debtor 2	Edward L. Johnson Thelma A. Johnson		Case number (if known)	
Exar ■ No	ns against third parties, whether or not you have filed a law mples: Accidents, employment disputes, insurance claims, or ri		and for payment	
☐ Yes	s. Describe each claim			
■ No	r contingent and unliquidated claims of every nature, inclu	iding counterclaims o	of the debtor and rights to	set off claims
⊔ Yes	s. Describe each claim			
35. Any f ■ No	inancial assets you did not already list			
☐ Yes	s. Give specific information			
	I the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$2,136.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
37 Do vo i	u own or have any legal or equitable interest in any business-relat	ed property?		
	Go to Part 6.	ou proporty.		
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y o	ou own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
■ N	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	ou have other property of any kind you did not already list mples: Season tickets, country club membership	?		
■ No				
☐ Yes	s. Give specific information			
54. Add	I the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Par	t 1: Total real estate, line 2			\$7,000.00
	t 2: Total vehicles, line 5	\$26,295.00		41,000.00
	t 3: Total personal and household items, line 15	\$1,050.00		
	t 4: Total financial assets, line 36	\$2,136.00		
	t 5: Total business-related property, line 45	\$0.00		
	t 6: Total farm- and fishing-related property, line 52	\$0.00		
	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$29,481.00	Copy personal property to	otal \$29,481.00
63. Tot	al of all property on Schedule A/B. Add line 55 + line 62			\$36,481.00

Fill in this inform	ation to identify your	case:			
Debtor 1	Edward L. Johnso	on			
	First Name	Middle Name	Last Name		
Debtor 2	Thelma A. Johnson	on			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case number					
(if known)				Check if this is an	
				amended filing	
(Spouse if, filing) United States Banl Case number	First Name	Middle Name		_	1

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2805 Blossom Drive Lot 3 Dover, PA 17315 York County	\$7,000.00		\$7,000.00	11 U.S.C. § 522(d)(1)
	1985 Single Wide 14x70 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	Living Room: Couch (\$35); Bookcase (\$5); Two Chairs (\$30); Table (\$5);	\$80.00		\$80.00	11 U.S.C. § 522(d)(3)
	Lamp (\$5) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Kitchen: Table (\$15); Four Chairs (\$20); Microwave (\$20); Refrigerator	\$217.00		\$217.00	11 U.S.C. § 522(d)(3)
	(\$30): Deep Freezer (\$30): Washing			100% of fair market value, up to	

any applicable statutory limit

100% of fair market value, up to

any applicable statutory limit

\$78.00

Official Form 106C

Schedule C: The Property You Claim as Exempt

\$78.00

page 1 of 2

Machine (\$20); Dryer (\$15); Stove

(\$10); Silverware (\$2) Line from Schedule A/B: 6.2

(\$35); Vanity (\$3)

Line from Schedule A/B: 6.3

(\$30); Dishes (\$10); Cookware (\$10); China (\$2); Lamp (\$3); China Closet

Bedroom: Bed (\$25); Chair (\$5); Two

Dressers (\$10); Chest of Drawers

Desc

11 U.S.C. § 522(d)(3)

	DIOI I	ward L. Johnson elma A. Johnson			Case number (if known)	
		ription of the property and line on A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
		ooms: Vacuum Cleaner (\$10); ir Conditioners (\$30); Power	\$260.00		\$260.00	11 U.S.C. § 522(d)(3)
	Tools (\$	(200); Lawn Mower (\$200) Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit	
		evisions (\$30); Radio (\$5); \$10); VCR/DVD Player (\$5)	\$50.00	•	\$50.00	11 U.S.C. § 522(d)(3)
		Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Collecti	bles Schedule A/B: 8.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Shotgui	1 Schedule A/B: 10.1	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
	Line irom	Concaute 702.			100% of fair market value, up to any applicable statutory limit	
		g Apparel Debtor (\$150) oparel Co-Debtor (\$150)	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
		Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry	Schedule A/B: 12.1	\$15.00		\$15.00	11 U.S.C. § 522(d)(4)
	Line irom	Concaute 702. 1211			100% of fair market value, up to any applicable statutory limit	
	Cash Line from	Schedule A/B: 16.1	\$95.00		\$95.00	11 U.S.C. § 522(d)(5)
	Line from	General Ad.			100% of fair market value, up to any applicable statutory limit	
		ng: BB&T Schedule A/B: 17.2	\$2,041.00		\$2,041.00	11 U.S.C. § 522(d)(5)
	Line irom	Concaute 7VB. TTI			100% of fair market value, up to any applicable statutory limit	
3.	(Subject to No	claiming a homestead exemption of o adjustment on 4/01/22 and every 3	Byears after that for ca	ases fi	,	,
		Did you acquire the property covere No	u by the exemption w	itriin 7	,213 days before you filed this case	t.
		Yes				

Official Form 106C

Fill in this inform	nation to identify you	ır case:			
Debtor 1	Edward L. John	ison			
	First Name	Middle Name Last Name			
Debtor 2	Thelma A. John				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bar	kruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA			
Case number					
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Form	106D				
		Who Hove Claims Secures	hy Droport	.,	40/45
Schedule	D: Creditors	Who Have Claims Secured	by Propert	<u>y </u>	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. Or			
,	have claims secured by	v vour property?			
	·	his form to the court with your other schedules. Yo	ou have nothing else t	o report on this form	
_	all of the information	•	ou navo noumng oldo t	o roport ou timo roum.	
		Delow.			
Part 1: List All	Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.4 Ally Einan	oial	Describe the preparty that accurace the claims	value of collateral.	claim	If any
2.1 Ally Finan Creditor's Name		Describe the property that secures the claim:	\$34,142.00	\$26,295.00	\$7,847.00
Greater e Hame		2019 Kia Sportage 6000 miles			
Attn: Bank		As of the date you file, the claim is: Check all that			
PO Box 38		apply.			
	ton, MN 55438	Contingent			
Number, Street,	City, State & Zip Code	Unliquidated			
Who owes the del	ht? Chaak ana	☐ Disputed Nature of lien. Check all that apply.			
_	ot r Check one.	_			
☐ Debtor 1 only ☐ Debtor 2 only			urea		
■ Debtor 1 and De	htor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	bior 2 only le debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla		☐ Other (including a right to offset)			
community del					

Official Form 106D

Opened 08/19 Last

Date debt was incurred Active 12/19

Desc

3350

Last 4 digits of account number

Debtor 1 Edward L. Johnson	Ca	ase number (if known)		
	le Name Last Name			
Debtor 2 Thelma A. Johnson First Name Midd	le Name Last Name			
First Name Midd	le Name Last Name			
2.2 Fulton Bank N.a	Describe the property that secures the claim:	\$24,765.00	\$0.00	\$24,765.00
Creditor's Name	Open Range			
	Open Range Camper Being			
	Repossed 2/4/20			
PO Box 4887	As of the date you file, the claim is: Check all that apply.			
Lancaster, PA 17604	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	ured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	er U Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	— Other (mordaling a right to onset)			
Opened 10/13 Las Date debt was incurred Active 12/	·			
2.3 Northwest Bank	Describe the property that secures the claim:	\$13,731.00	Unknown	Unknown
Creditor's Name	Automobile Voluntary Turned In			
	Sept/Oct 2019			
Attn: Bankruptcy	As of the date you file, the claim is: Check all that			
PO Box 128	apply.			
Warren, PA 16365	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt? Obselvers	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secucar loan)	ured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and anoth				
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened				
04/19 Las	0004			
Date debt was incurred Active 08/	Last 4 digits of account number 9334			
Add the dollar value of your entries i	n Column A on this page. Write that number here	\$72 638 00	1	
-	n Column A on this page. Write that number here:	\$72,638.00		
-		\$72,638.00 \$72,638.00		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

		case:			
Debtor 1	Edward L. Johnso	on			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Thelma A. Johnso	Middle Name	Last Name		
United States Banl	kruptcy Court for the:	MIDDLE DISTRI	CT OF PENNSYLVANIA		
Case number					
(if known)					Check if this is an
					amended filing
Official Form	106F/F				
		ho Have Un	secured Claims		12/15
				Part 2 for creditors with NONPRIORITY cla	aims. List the other party t
	of Your PRIORITY Un				· · · · · · · ·
	s have priority unsecured	d claims against you	1?		
No. Go to Par	rt 2.				
☐ Yes.					
Part 2: List All	of Your NONPRIORIT	Y Unsecured Clai	ms		
	s have nonpriority unsec				
′		_	to the court with your other sche	adulaa	
_	, nothing to report in this pe	art. Submit this form t	o the court with your other some	edules.	
Yes.	, nothing to report in this pe	art. Submit this form 1	o the court with your other some	adules.	
Yes. 4. List all of your runsecured claim,	nonpriority unsecured cla	aims in the alphaber	tical order of the creditor who each claim listed, identify what t	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
Yes. 4. List all of your runsecured claim, than one creditor	nonpriority unsecured cla	aims in the alphaber	tical order of the creditor who each claim listed, identify what t	holds each claim. If a creditor has more the holds each claim it is. Do not list claims already in	ncluded in Part 1. If more
Yes. 4. List all of your runsecured claim, than one creditor Part 2.	nonpriority unsecured cla	aims in the alphabe for each claim. For e st the other creditors	tical order of the creditor who each claim listed, identify what t	holds each claim. If a creditor has more the holds each claim it is. Do not list claims already in	ncluded in Part 1. If more e Continuation Page of
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau control Nonpriority (nonpriority unsecured cla , list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name	aims in the alphaber of for each claim. For each claim. For each creditors of the other creditors ment Last	tical order of the creditor who each claim listed, identify what to in Part 3.If you have more than	pholds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau control Nonpriority (3607 Ros	nonpriority unsecured cla , list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave	aims in the alphaber of for each claim. For each claim. For each creditors of the other creditors ment Last	tical order of the creditor who each claim listed, identify what t in Part 3.If you have more than	pholds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau control Nonpriority (3607 Rossuite 502 Camp Hi	nonpriority unsecured cla , list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2	aims in the alphaber of for each claim. For each claim. St the other creditors ment Last	tical order of the creditor who each claim listed, identify what to in Part 3.lf you have more than 4 digits of account number on was the debt incurred?	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Conspirity Garage Suite 502 Camp Hill Number Street	nonpriority unsecured cla , list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2 II, PA 17011 eet City State Zip Code	aims in the alphaber of for each claim. For each claim. St the other creditors ment Last	tical order of the creditor who each claim listed, identify what to in Part 3.If you have more than	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Control Nonpriority Control Source 502 Camp Hill Number Street Who incurred	nonpriority unsecured cla i, list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2 II, PA 17011 eet City State Zip Code red the debt? Check one.	aims in the alphaber of for each claim. For each claim. St the other creditors ment Whe	tical order of the creditor who each claim listed, identify what to in Part 3.lf you have more than 4 digits of account number on was the debt incurred?	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Control Nonpriority (3607 Rossite 502 Camp Hill Number Street Who incurrate Debtor 1	nonpriority unsecured cla list the creditor separately rholds a particular claim, list of Account Manager Creditor's Name semont Ave 2 II, PA 17011 eet City State Zip Code red the debt? Check one.	aims in the alphaber of for each claim. For each claim. It is the other creditors ment Whe As c	tical order of the creditor who each claim listed, identify what the in Part 3. If you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Conspirity Constitution of the second constitu	nonpriority unsecured cla , list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2 II, PA 17011 eet City State Zip Code ed the debt? Check one.	aims in the alphaber of for each claim. For ea	tical order of the creditor who each claim listed, identify what the in Part 3. If you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent.	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Control of the American Suite 502 Camp Hill Number Street Who incurrup Debtor 1 Debtor 1	nonpriority unsecured cla i, list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2 III, PA 17011 eet City State Zip Code red the debt? Check one. only 2 only and Debtor 2 only	aims in the alphaber of for each claim. For each claim. It is the other creditors ment As co	tical order of the creditor who each claim listed, identify what the in Part 3. If you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent Unliquidated Disputed	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851 S: Check all that apply	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Conversion of the co	nonpriority unsecured clauding list the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name semont Ave 2 ll, PA 17011 eet City State Zip Code ed the debt? Check one. only 2 only and Debtor 2 only one of the debtors and and	aims in the alphaber of for each claim. For each claim. It is the other creditors Ment As contact the contact th	cical order of the creditor who each claim listed, identify what is in Part 3.If you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent Unliquidated Disputed to NONPRIORITY unsecured	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851 S: Check all that apply	ncluded in Part 1. If more e Continuation Page of Total claim
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Conversion of the co	nonpriority unsecured cla i, list the creditor separately r holds a particular claim, list of Account Manager Creditor's Name semont Ave 2 III, PA 17011 eet City State Zip Code red the debt? Check one. only 2 only and Debtor 2 only	aims in the alphabet of for each claim. For each claim. It is the other creditors Ment As contact Other Type Tunnity	tical order of the creditor who each claim listed, identify what in Part 3.lf you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent Unliquidated Disputed to of NONPRIORITY unsecured student loans	holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851 s: Check all that apply	roluded in Part 1. If more e Continuation Page of Total claim \$85.00
4.1 Bureau content of the first state of the first	nonpriority unsecured clauding list the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name semont Ave 2 ll, PA 17011 eet City State Zip Code ed the debt? Check one. only 2 only and Debtor 2 only one of the debtors and and	aims in the alphabet of for each claim. For ea	tical order of the creditor who each claim listed, identify what in Part 3.lf you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent Unliquidated Disputed to of NONPRIORITY unsecured student loans	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851 S: Check all that apply	roluded in Part 1. If more e Continuation Page of Total claim \$85.00
Yes. 4. List all of your runsecured claim, than one creditor Part 2. 4.1 Bureau Conversion of the co	nonpriority unsecured clauding is the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name semont Ave 2 lll, PA 17011 eet City State Zip Code ed the debt? Check one. only and Debtor 2 only one of the debtors and and this claim is for a committed this claim is for a committed the credit of the	aims in the alphabet of for each claim. For each claim. It is the other creditors Ment As contact Other Type munity Contact Contact	dical order of the creditor who each claim listed, identify what in Part 3.lf you have more than 4 digits of account number on was the debt incurred? If the date you file, the claim is contingent Unliquidated Disputed to of NONPRIORITY unsecured student loans Deligations arising out of a separt as priority claims	holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 5851 s: Check all that apply	ncluded in Part 1. If more e Continuation Page of Total claim \$85.00

Schedule E/F: Creditors Who Have Unsecured Claims

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Desc

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Debto	Thelma A. Johnson	Case number (if known)	
1.2	Bureau of Account Management	Last 4 digits of account number 4632	\$105.00
	Nonpriority Creditor's Name 3607 Rosemont Ave Suite 502	When was the debt incurred?	
	Camp Hill, PA 17011 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical UPMC Pinnacle	
3	Bureau of Account Management	Last 4 digits of account number 0448	\$10.00
	Nonpriority Creditor's Name 3607 Rosemont Ave Suite 502	When was the debt incurred?	
	Camp Hill, PA 17011 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Pinnacle Medical Services	
4	Bureau of Account Management	Last 4 digits of account number 9085	\$10.00
	Nonpriority Creditor's Name 3607 Rosemont Ave Suite 502	When was the debt incurred?	
	Camp Hill, PA 17011 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Pinnalce Medical Services	

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Thelma A. Johnson			
Citi/Sears Nonpriority Creditor's Name	Last 4 digits of account number	3617	\$2,838.0
Citibank/Centralized Bankruptcy PO Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 06/12 Last Active 1/05/20	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Credit Card	<u> </u>	
ComenityCapital/Boscov	Last 4 digits of account number	0642	\$629.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 182125	When was the debt incurred?	Opened 06/12 Last Active 12/19	
Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Commercial Acceptance Company Nonpriority Creditor's Name	Last 4 digits of account number	35L6	\$10,223.0
2300 Gettysburg Road Suite 102	When was the debt incurred?		
Camp Hill, PA 17011 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	и Стапп.	
Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
No			
Yes	Other. Specify Medical Ha	nover Hospital V00004907508	

Schedule E/F: Creditors Who Have Unsecured Claims

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Thelma A. Johnson	Case number (if known)	
Computer Credit, Inc.	Last 4 digits of account number 9352	\$85.00
Nonpriority Creditor's Name Claim Dept. 009696/ PO Box 5238 470 West Hanes Mill Road Winston Salem, NC 27113-5288	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical UPMC Pinnacle	
Computer Credit, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 9352	\$105.00
Claim Dept. 009696/ PO Box 5238 470 West Hanes Mill Road	When was the debt incurred?	
Winston Salem, NC 27113-5288 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical UPMC Pinnacle	
HRRG	Last 4 digits of account number 4516	\$609.00
Nonpriority Creditor's Name	Last 4 digits of account number 4516	φουσ.οι
PO Box 5406 Cincinnati, OH 45273-7942	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	_ Emer Phy Assoc of PA Acct #	
Yes	Other. Specify 0204703953-70300494	

Schedule E/F: Creditors Who Have Unsecured Claims

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Mariner Finance, LLC	Last 4 digits of account number	1017	\$5,019.00		
Nonpriority Creditor's Name Attn: Bankruptcy 8211 Town Center Drive Nottingham, MD 21236	When was the debt incurred?	Opened 08/18 Last Active 12/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
Yes	Other. Specify Secured				
Members 1st	Last 4 digits of account number	0007	\$6,336.00		
Nonpriority Creditor's Name 5000 Louise Drive	When was the debt incurred?	Opened 04/17 Last Active 12/27/19			
Mechanicsburg, PA 17055					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes	Other. Specify				
Members 1st Nonpriority Creditor's Name	Last 4 digits of account number	0003	\$8,060.00		
5000 Louise Drive Mechanicsburg, PA 17055	When was the debt incurred?	Opened 04/16 Last Active 12/09/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify				

Schedule E/F: Creditors Who Have Unsecured Claims

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otor 2 Thelma A. Johnson		Case number (if known)					
Members 1st	Last 4 digits of account number	8472	\$4,838.0				
Nonpriority Creditor's Name 5000 Louise Drive	When was the debt incurred?	Opened 06/13 Last Active 01/20					
Mechanicsburg, PA 17055 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i						
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
Yes	Other. Specify						
Members 1st	Last 4 digits of account number	4094	\$5,141.0				
Nonpriority Creditor's Name 5000 Louise Drive Mechanicsburg, PA 17055	When was the debt incurred?	Opened 05/16 Last Active 01/20					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i						
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
■ No □ Yes	☐ Debts to pension or profit-sharin						
☐ Yes	Other. Specify						
OneMain Financial Nonpriority Creditor's Name	Last 4 digits of account number	4085	\$9,793.0				
Attn: Bankruptcy PO Box 3251 Evansville, IN 47731	When was the debt incurred?	Opened 08/19 Last Active 01/20					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
☐ Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa						
Is the claim subject to offset?	report as priority claims						
■ No	Debts to pension or profit-sharing	= 1					
Yes	■ Other. Specify Unsecured						

Schedule E/F: Creditors Who Have Unsecured Claims

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Peerless Credit Services, Inc	Last 4 digits of account number 437E	\$412.00
Nonpriority Creditor's Name	Last 4 digits of account number 437E	Ψ412.00
PO Box 518	When was the debt incurred?	
Middletown, PA 17057-0518 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	pt
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Hanover Medical Hospital 1698074 and 1698073	_
Synchrony Bank/Lowes	Last 4 digits of account number 5654	\$2,546.00
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060	When was the debt incurred? Opened 12/15 Last Active 12/19	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Charge Account	
Synergetic Communication, Inc.	Last 4 digits of account number 5355	\$960.00
Nonpriority Creditor's Name 5450 N.W. Central #220 Houston. TX 77092-2016	When was the debt incurred?	_
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no	ot
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
	Orignal Creditor: PA Emergency Physician PLLC Current Creditor: Cascado Capital I I C Ac	
☐ Yes	Current Creditor: Cascade Capital LLC Acc ■ Other. Specify No 104565700	51

Schedule E/F: Creditors Who Have Unsecured Claims

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		·	
TD Retail Card Services	Last 4 digits of account number	5894	\$3,301.00
Nonpriority Creditor's Name Attn: Bankruptcy 1000 Macarthur Blvd Mahwah, NJ 07430	When was the debt incurred?	Opened 4/11/18 Last Active 12/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
U.S. Bancorp	Last 4 digits of account number	0548	\$1,916.00
Nonpriority Creditor's Name			V.,U.
Attn: Bankruptcy 800 Nicollet Mall	When was the debt incurred?	Opened 10/17 Last Active 12/19	
Minneapolis, MN 55402 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other Specify Credit Card	<u> </u>	
UPMC Pinnacle	Last 4 digits of account number	1320	\$171.32
Nonpriority Creditor's Name PO Box 2353	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Thelma A. Johnson	Case number (if known)	
UPMC Pinnacle	Last 4 digits of account number 9352	\$143.2
Nonpriority Creditor's Name PO Box 2353	When was the debt incurred?	
Harrisburg, PA 17105-2353 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
UPMC Pinnacle	Last 4 digits of account number 9352	\$125.
Nonpriority Creditor's Name	Last 4 digits of account number	ΨΙΖΟ
PO Box 2353	When was the debt incurred?	
Harrisburg, PA 17105-2353	As of the date were file the elements Oberel all that seek	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
_	_ `	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
UPMC Pinnacle	Last 4 digits of account number 9352	\$243.
Nonpriority Creditor's Name	Last 4 digits of account number 9352	Ψ 243.
PO Box 2353 Harrisburg, PA 17105-2353	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical	

Debtor 1 Debtor 2		L. Johnson A. Johnson		Case n	umber (if know	n)	
4.2 6 Z	oll		Last 4 digits of account number	2659)		\$2,551.56
1	21 Gamm		When was the debt incurred?				
N	Pittsburgh, PA 15238 Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim	is: Chec	k all that apply		
	Debtor 1 or	nlv	☐ Contingent				
_	Debtor 2 or	,	☐ Unliquidated				
	_	nd Debtor 2 only	☐ Disputed				
_	_	e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		nis claim is for a community	☐ Student loans				
d	ebt	ubject to offset?	☐ Obligations arising out of a sep report as priority claims	aration a	greement or div	vorce that you did not	
	No		Debts to pension or profit-shari	ing plans,	and other simil	lar debts	
] Yes		Other. Specify Medical				
is trying to collect from you for a debt you owe to have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out Name and Address FBCS, Inc. 330 S. Warminster Road Suite 353		s in Parts 1 or 2, do not fill out er Road Suite 353	or submit this page. On which entry in Part 1 or Part 2 did yo Line 4.19 of (Check one):	On which entry in Part 1 or Part 2 did you list the original creditor?			
Hatboro	, PA 1904	10	Last 4 digits of account number		580	, , , , , , , , , , , , , , , , , , , ,	
	Finance stern Blv	d.	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number	Last 4 digits of account number 2020			
	amounts o		Jnsecured Claim laims. This information is for statistical	reporting	g purposes on	ly. 28 U.S.C. §159. Add the a	mounts for each
type of u	insecured c	laim.			_		
	6a	. Domestic support obligatio	ne	6a.	\$	Total Claim	
Total claims	oa.	. Domestic support obligatio	110	oa.	Ψ	0.00	
from Part			ots you owe the government	6b.	\$	0.00	
•		•	al injury while you were intoxicated nsecured claims. Write that amount here.	6c. 6d.	\$ \$	0.00 0.00	
	6e	. Total Priority. Add lines 6a th	prough 6d	6e.		0.00	
	06	. Total Friority. Add lines oa li	iiougii ou.	oe.	\$	0.00	
	C.f	Cturdent leans		Ct.		Total Claim	
Total claims	6f.			6f.	\$	0.00	
from Part	2 6g	 Obligations arising out of a you did not report as priorit 	separation agreement or divorce that	6g.	\$	0.00	
	6h		sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	 Other. Add all other nonpriority unsecured claims. Write that amount here. 			\$	66,255.73	

Schedule E/F: Creditors Who Have Unsecured Claims

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Total Nonpriority. Add lines 6f through 6i.

Desc

66,255.73

Fill in this infor	mation to identify your	case:		
Debtor 1	Edward L. Johns	on		
	First Name	Middle Name	Last Name	
Debtor 2	Thelma A. Johnse	on		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	•				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Desc

Fill in this	information to identify your	case:			
Debtor 1	Edward L. Johns	on			
Daleton	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Thelma A. Johns First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case numb	per				Check if this is on
(ii kilowii)					Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
fill it out, ar your name		boxes on the left. Attack . Answer every question	n the Additional Page t 	o this page. On the top	eeded, copy the Additional Page, of any Additional Pages, write
	you have any codebiors: (ii	you are ming a joint case,	do not list either spouse	as a codebior.	
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.	Nevada, New Mexico, Pu	ierto Rico, Texas, Wash		states and territories include
3. In Colu in line Form	2 again as a codebtor only i	ors. Do not include your f that person is a guaran	spouse as a codebtor	sure you have listed th	gwith you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule:	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			Schedule E/F, li	ne
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to	identify your c	ase:							
De	btor 1	Edward L. J	ohnson			_				
1 -	btor 2 ouse, if filing)	Thelma A. J	ohnson							
Un	ited States Bankrupt	cy Court for the	: MIDDLE DISTRICT O	F PENNSYLVANIA		_				
	se number nown)					Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form	<u> 1061</u>					MM / DD/ Y	YYYY		
S	chedule I: \	Your Inc	ome							12/15
sup spo atta	pplying correct infor buse. If you are sepa ich a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filii ir spouse is not filing wi On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with you, incl on about your spo	ude infor ouse. If m	mation about nore space is	your needed,
1.	Fill in your emploinformation.	yment		Debtor 1			Debtor 2	2 or non-f	filing spouse	
	If you have more t		Employment status	■ Employed			☐ Empl	☐ Employed		
	attach a separate information about employers.			☐ Not employed	■ Not e	■ Not employed				
	Include part-time, self-employed wor		Occupation Employer's name	Dover Area Sch	nool Dis	tric				
	Occupation may ir or homemaker, if it		Employer's address	Employer's address 101 Edgeway Road Dover, PA 17315						
			How long employed to	here? <u>3 1/2 M</u>	lonths					
Pa	rt 2: Give Deta	ails About Mo	nthly Income							
	imate monthly inco use unless you are s		ate you file this form. If	you have nothing to r	eport for	any	ine, write \$0 in the	space. In	nclude your no	n-filing
	ou or your non-filing se space, attach a se		ore than one employer, co	ombine the informatio	on for all	empl	oyers for that perso	on on the	lines below. If	you need
							For Debtor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (be calculate what the monthle		2.	\$	1,049.36	\$	0.00	-
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross I	ncome. Add lii	ne 2 + line 3.		4.	\$	1,049.36	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

					For Debtor 1				For Debtor 2 or			
	Conv	y line 4 here	4.		\$	1 040	36		on-filing s	•		
	СОР	y inte + nere	٦.		Ψ_	1,049	9.30	Ψ			0.00	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	200).11	\$		•	0.00	
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$			0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$-		0.00	\$			0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$ -		0.00	\$		_	0.00	
	5e.	Insurance	5e.		\$		0.00	\$			0.00	
	5f.	Domestic support obligations	5f.		\$		0.00	\$			0.00	
	5g.	Union dues	5g.		\$		0.00	\$			0.00	
	5h.	Other deductions. Specify:	5h.		\$		0.00				0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		* – \$).11	\$			0.00	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		* – \$		9.25	\$			0.00	
			•		Ψ –	040	J.25	Ψ			J.00	
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a.		\$_	(0.00	\$		(0.00	
	8b.	Interest and dividends	8b.		\$_	(0.00	\$			0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.	8c.		\$_	(0.00	\$		(0.00	
	8d.	Unemployment compensation	8d.		\$_	(0.00	\$		(0.00	
	8e.	Social Security	8e.		\$_	2,144	1.00	\$		66′	1.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	(0.00	\$		(0.00	
	8g.	Pension or retirement income	8g.		\$	1,081	1.67	\$		(0.00	
	8h.	Other monthly income. Specify:	8h.	+.	\$_	(0.00	+ \$		0.00		
9.	Δdd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	(\$	3,225	67	\$		61	61.00	
٥.	Auu	an other meetine. Add lines database out-detait-detait.	J. _	Ľ		3,223).U1	Ψ			31.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		4,074.92	+ \$		661.00	= :	\$	4,735.92
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:	depe								§	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certales								\$		4,735.92
											mbine	
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?							mc	onthly	income
		Yes. Explain: Debtor has heart problems and his doctor is urg	ing h	im	ı to	quit work	c. Th	e ba	nkruptcy	/ w	ill allo	w him

Official Form 106l Schedule I: Your Income page 2

to do that.

						ı						
FIII	in this informa	ation to identify yo	our case:									
Deb	Edward L. Johnson				Check if this is:							
	Debtor 2 Thelma A. Johnson (Spouse, if filing)						☐ An amended filing ☐ A supplement showing postpetition chapte 13 expenses as of the following date:					
Unit	ed States Bankı	ruptcy Court for the	: MIDDL	E DISTRICT OF PENNSYL	_VANIA	<u></u>	MM / DD / YYYY					
	se number nown)											
Oi	fficial Fo	rm 106J										
Sc	chedule	J: Your	Exper	ises				12/15				
Be	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people ar ch another sheet to this				or supplying correct				
Par		ribe Your House	ehold									
1.	Is this a joir ☐ No. Go to	o line 2.										
			in a separ	ate household?								
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debto	or 2.					
2.	Do vou hav	e dependents?	■ No									
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state dependents							□ No □ Yes				
								□No				
								☐ Yes				
								□ No □ Yes				
								□ No				
								☐ Yes				
3.	expenses o	penses include f people other t d your depende	han _—	No Yes								
Des				h. F								
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp								
the	value of suc	h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your expe	enses				
(On	ficial Form 10	.) (. ca. cxp					
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgag	e 4. \$		350.00				
	If not include	ded in line 4:										
	4a. Real e	estate taxes				4a. \$		4.75				
		erty, homeowner's	s, or renter	's insurance		4b. \$		17.18				
				upkeep expenses		4c. \$		300.00				
_		owner's associa			mo oquity loons	4d. \$		0.00				
5.	Auditional I	mortgage paym	ents for yo	our residence, such as ho	ne equity loans	5. \$		0.00				

Official Form 106J Schedule J: Your Expenses page 1

Deb			. Johnson . Johnson	Ca	ase num		
6.	Utilities	s:					
	6a. El	lectricity, h	eat, natural gas		6a.	\$	125.00
	6b. W	Vater, sew	er, garbage collection		6b.	\$	85.62
	6c. Te	elephone,	cell phone, Internet, satellite, and cable	services	6c.	\$	230.00
	6d. Of	ther. Spec	ify:		6d.	\$	0.00
7.	Food ar	nd housel	keeping supplies		7.	\$	700.00
8.	Childca	are and ch	ildren's education costs		8.	\$	0.00
9.	Clothing	g, laundry	, and dry cleaning		9.	\$	167.00
10.		-	oducts and services		10.	\$	100.00
11.		_	al expenses		11.	\$	315.00
12.	Transportation. Include gas, maintenance, bus or train fare.						
			payments.		12.	\$	175.00
13.	Entertai	inment, c	ubs, recreation, newspapers, magaz	ines, and books	13.	\$	100.00
14.	Charital	ble contri	butions and religious donations		14.	\$	0.00
15.	Insuran	nce.					
			urance deducted from your pay or inclu	ded in lines 4 or 20.			
		ife insuran			15a.	· -	41.80
	15b. He	lealth insu	ance		15b.	·	100.00
	15c. Ve	ehicle insu	ırance		15c.	*	130.55
			ance. Specify:		15d.	\$	0.00
	Specify:	:	ude taxes deducted from your pay or ir	cluded in lines 4 or 20.	16.	\$	0.00
17.			ise payments:			_	
			nts for Vehicle 1		17a.	·	620.36
			nts for Vehicle 2		17b.	·	0.00
		other. Spec			_ 17c.	\$	0.00
	17d. O	other. Spec	ify:		_ 17d.	\$	0.00
18.			f alimony, maintenance, and suppor our pay on line 5, Schedule I, Your In		18.	\$	0.00
19.	Other pa	ayments	you make to support others who do	not live with you.		\$	0.00
	Specify:				_ 19.		
20.			ty expenses not included in lines 4 of	or 5 of this form or on <i>Schedu</i>	le I: Yo	our Income.	
	20a. M	fortgages (on other property		20a.	\$	0.00
	20b. Re	teal estate	taxes		20b.	\$	0.00
	20c. Pr	roperty, ho	meowner's, or renter's insurance		20c.	\$	0.00
	20d. M	1aintenanc	e, repair, and upkeep expenses		20d.	\$	0.00
	20e. Ho	lomeowne	's association or condominium dues		20e.	\$	0.00
21.	Other: S	Specify:	Dog Vet Care Yearly and Food		21.	+\$	75.00
00	0-11-				_		
22.		•	onthly expenses			c	2 627 66
			nrough 21.	trans Official Forms 400 LO		\$	3,637.26
			(monthly expenses for Debtor 2), if any			\$	
	22c. Add	d line 22a	and 22b. The result is your monthly ex	penses.		\$	3,637.26
23	Calcula	ite vour m	onthly net income.				
_0.		-	2 (your combined monthly income) from	Schedule I	23a.	\$	4,735.92
			nonthly expenses from line 22c above.	Conocado II	23b.	·	3,637.26
	200. 0	opy your i	nonting expenses from the 220 above.		200.	Ψ	3,037.20
			ur monthly expenses from your monthly syour <i>monthly net income</i> .	income.	23c.	\$	1,098.66
24.	For exam	nple, do you	n increase or decrease in your expen expect to finish paying for your car loan with rms of your mortgage?				ise or decrease because of a
		Г	Frankin bana.				
	☐ Yes.		Explain here:				

Fill in this infor	mation to identify your	case:		
Debtor 1	Edward L. Johns	on		
	First Name	Middle Name	Last Name	
Debtor 2	Thelma A. Johns			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Forn	n 106Dec			
Declarat	ion About a	an Individual	Debtor's Schedule	PS 12/15
	8 U.S.C. §§ 152, 1341, 1 n Below	1519, and 3571.		
Did you pa	y or agree to pay some	eone who is NOT an atto	rney to help you fill out bankruptcy fo	rms?
■ No				
☐ Yes. N	Name of person			ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
1144	No. of manhages 1 deed	that I have you the		,
	e true and correct.	that I have read the sum	mary and schedules filed with this de	eciaration and
X /s/ Edv	vard L. Johnson		X /s/ Thelma A. Johnson	1
Edwar	d L. Johnson		Thelma A. Johnson	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _	February 4, 2020		Date February 4, 202	20

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

		nation to identify you				
De	btor 1	Edward L. Johns	Middle Name	Last Name		
Del	btor 2	Thelma A. Johns		2451.141.115		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA		
	se number _					heck if this is an
					a	mended filing
	ficial Fo atement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
info nun	rmation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup	
1.		Details About Your Ma r current marital statu	rital Status and Where You is?	Lived Before		
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (Of	fficial Form 106H).		
Pai	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,500.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$5,000.00	☐ Wages, commissions, bonuses, tips	\$0.00	
	☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips \$10,590.00		☐ Wages, commissions, bonuses, tips	\$0.00	
	☐ Operating a business		☐ Operating a business		

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

□ No

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Social Security Income	\$2,147.00	Social Security Income	\$657.00
	Pension/Annuity	\$2,163.34		
For last calendar year: (January 1 to December 31, 2019)	Social Security Income	\$25,842.00	Social Security Income	\$9,516.00
	Pension/Annuity	\$12,980.04		
For the calendar year before that: (January 1 to December 31, 2018)	Social Security Income	\$26,304.00	Social Security Income	\$9,252.00
	Pension/Annuity	\$12,980.04		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. /	Are either	Debtor 1's	or Debtor 2'	s debts	primarily	consumer	debts?
------	------------	------------	--------------	---------	-----------	----------	--------

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

^{*} Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

	btor 1 Edward L. Johnson Thelma A. Johnson		Cas	se number (<i>if known</i>)	
	Yes. Debtor 1 or Debtor 2 or both had During the 90 days before you fill			al of \$600 or more	?
	☐ No. Go to line 7.				
	Yes List below each cred	r domestic support obligatio			you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ally Financial 200 Renaissance Center Detroit, MI 48243	November 2019 December 2019 January 2019	\$1,861.08	\$34,142.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor, alimony. No Yes. List all payments to an insider.	partners; relatives of any ge in control, or owner of 20%	neral partners; partne or more of their voting	erships of which yog g securities; and a	ou are a general partner; corporations ny managing agent, including one fo
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a debt that benefited an
	■ No				
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ons, and Foreclosures			
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.				
	□ No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	Mariner Finance	Collection	Magisterial Dis	strict Judge	Pending
	v. Edward Johnson and Thelma Johnson		19-2-01 Magisterial Dis Barry L. Blos	strict Judge	☐ On appeal ☐ Concluded

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	otor 1 Edward L. Johnson Thelma A. Johnson	Case	e number (if known)			
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below	ey, was any of your property repossessed, fo	preclosed, garnished, attached	l, seized, or levied?		
	□ No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property	Date	Value of the		
	Creditor Name and Address	Describe the Property	Date	property		
		Explain what happened		,		
	Northwest Bank	Vehicle	Sept/Oct 2019	Unknown		
	Attn: Bankruptcy	<u>_</u>				
	PO Box 128	Property was repossessed.				
	Warren, PA 16365	Property was foreclosed.				
		☐ Property was garnished.				
		☐ Property was attached, seized or levied.				
	Fulton Bank N.A. PO Box 4887	Camper	February 4, 2020	Unknown		
	Lancaster, PA 17604	■ Property was repossessed.				
		☐ Property was foreclosed.				
		☐ Property was garnished.				
		☐ Property was attached, seized or levied.				
10	☐ Yes. Fill in the details. Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount		
12.	court-appointed receiver, a custodian, or as No Yes	ey, was any of your property in the possession other official?	on of an assignee for the bene	etit of creditors, a		
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value o	of more than \$600 per person?	,		
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:					
14.	■ No	ccy, did you give any gifts or contributions w	rith a total value of more than	\$600 to any charity?		
	☐ Yes. Fill in the details for each gift or conf	ribution.				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	l Describe what you contributed	Dates you contributed	Value		
	Addi 955 (Hullings), Street, Oity, State and 21P Code)					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Thelma A. Johnson	Case number	er (if known)	
art	6: List Certain Losses			
	Within 1 year before you filed for bankr or gambling?	ruptcy or since you filed for bankruptcy, did you lose ar	ything because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part	7: List Certain Payments or Transfe	•		
6.	Within 1 year before you filed for bankr	ruptcy, did you or anyone else acting on your behalf pa		erty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Mooney Law 230 York Street Hanover, PA 17331	Attorney Fees: \$1,525 Costs: \$475 (\$335 Filing Fee; \$80 Credit Report; \$60 Credit Counseling and	January 16, 2020	\$2,000.00
		Debtor Education)		
		ruptcy, did you or anyone else acting on your behalf pay reditors or to make payments to your creditors?	y or transfer any prope	erty to anyone who
	promised to help you deal with your cr Do not include any payment or transfer the	ruptcy, did you or anyone else acting on your behalf pay reditors or to make payments to your creditors?	y or transfer any prope	erty to anyone who
	promised to help you deal with your crops not include any payment or transfer the	ruptcy, did you or anyone else acting on your behalf pay reditors or to make payments to your creditors?	Date payment or transfer was made	Amount of
88.	Promised to help you deal with your crop not include any payment or transfer the No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bank transferred in the ordinary course of your part of the North Nort	ruptcy, did you or anyone else acting on your behalf payeditors or to make payments to your creditors? at you listed on line 16. Description and value of any property transferred kruptcy, did you sell, trade, or otherwise transfer any prour business or financial affairs? ers made as security (such as the granting of a security interesting to the security in the security interesting to th	Date payment or transfer was made operty to anyone, othe	Amount of payment er than property
88.	Promised to help you deal with your crop not include any payment or transfer the No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bank transferred in the ordinary course of you not used both outright transfers and transfer not use gifts and transfers that you have a No	ruptcy, did you or anyone else acting on your behalf payreditors or to make payments to your creditors? lat you listed on line 16. Description and value of any property transferred kruptcy, did you sell, trade, or otherwise transfer any prour business or financial affairs? ers made as security (such as the granting of a security interal listed on this statement. Description and value of property transferred Description and value of property transferred	Date payment or transfer was made operty to anyone, other rest or mortgage on your early property or ats received or debts	Amount of payment er than property
88.	No Person Who Was Paid Address Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer nolude gifts and transfers that you have a No Yes. Fill in the details. Person Who Received Transfer	ruptcy, did you or anyone else acting on your behalf payreditors or to make payments to your creditors? lat you listed on line 16. Description and value of any property transferred kruptcy, did you sell, trade, or otherwise transfer any prour business or financial affairs? ers made as security (such as the granting of a security interal listed on this statement. Description and value of property transferred Description and value of property transferred	Date payment or transfer was made operty to anyone, other rest or mortgage on your	Amount of payment or than property r property). Do not
88. 1	No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bank transferred in the ordinary course of your course of you	ruptcy, did you or anyone else acting on your behalf payreditors or to make payments to your creditors? Description and value of any property transferred kruptcy, did you sell, trade, or otherwise transfer any prour business or financial affairs? ers made as security (such as the granting of a security interalready listed on this statement. Description and value of property transferred Describtion and value of payment paid in the payment payment paid in the payment paid in the payment payment paid in the payment paid in the payment	Date payment or transfer was made operty to anyone, other rest or mortgage on your early property or this received or debts exchange	Amount of payment or than property r property). Do not Date transfer was made
8. 1	No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bank transferred in the ordinary course of you could both outright transfers and transfer nclude gifts and transfers that you have a No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Within 10 years before you filed for barbeneficiary? (These are often called asset	ruptcy, did you or anyone else acting on your behalf payreditors or to make payments to your creditors? Description and value of any property transferred kruptcy, did you sell, trade, or otherwise transfer any prour business or financial affairs? ers made as security (such as the granting of a security interalready listed on this statement. Description and value of property transferred Describtion and value of payment paid in the payment payment paid in the payment paid in the payment payment paid in the payment paid in the payment	Date payment or transfer was made operty to anyone, other rest or mortgage on your early property or this received or debts exchange	Amount of payment or than property r property). Do not Date transfer was made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 8:	List of Certain Financial Accounts, In	strun	nents, Safe Deposi	it Boxes, and St	orage Unit	s		
20.	sol Inc	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
		No							
		Yes. Fill in the details.							
		nme of Financial Institution and Idress (Number, Street, City, State and ZIP de)		st 4 digits of count number	Type of account instrument	unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer	
21.		you now have, or did you have within 1 h, or other valuables?	year	before you filed fo	r bankruptcy, ar	ny safe dep	oosit box or other deposit	tory for securities,	
		No Yes. Fill in the details.							
	_	nme of Financial Institution Idress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Hav	ve you stored property in a storage unit	or pla	ace other than you	r home within 1	year befor	re you filed for bankrupto	y?	
		No Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)			Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9:	Identify Property You Hold or Control	for S	Someone Fise					
23.	Do	you hold or control any property that so someone.			ude any propert	ty you bori	rowed from, are storing fo	or, or hold in trust	
		No Yes. Fill in the details.							
		vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, S Code)		Describe	the property	Value	
Par	t 10	Give Details About Environmental Info	orma	ition					
For	the	— purpose of Part 10, the following definiti	ons a	apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
		e means any location, facility, or propert own, operate, or utilize it, including dispo	-	-	environmental l	aw, wheth	er you now own, operate,	, or utilize it or used	
		zardous material means anything an env ardous material, pollutant, contaminant			as a hazardous	waste, ha	zardous substance, toxic	substance,	
Rep	ort a	all notices, releases, and proceedings th	at yo	u know about, reg	ardless of when	they occu	ırred.		
24.	Has	s any governmental unit notified you tha	t you	may be liable or p	otentially liable	under or i	n violation of an environn	nental law?	
		No Yes. Fill in the details.							
	□			Covernmental	.14	Environ	anmental law if	Date of matica	
		Ime of site Idress (Number, Street, City, State and ZIP Code)		Governmental ur Address (Number, S ZIP Code)			onmental law, if you it	Date of notice	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Edward L. Johnson Thelma A. Johnson		Case number (if known)	
25.	Have you notified any governmental unit o	of any release of hazardous material?		
25.	_	of any release of flazardous filaterial?		
	■ No □ Yes. Fill in the details.			
	Name of site	Governmental unit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of House
26.	Have you been a party in any judicial or ad	Iministrative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or	r Connections to Any Business		
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have an	y of the following connections to an	y business?
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time	
	<u> </u>	pany (LLC) or limited liability partnershi		
	☐ A partner in a partnership	. , , , , , , , , , , , , , , , , , , ,	,	
	☐ An officer, director, or managing e	vecutive of a corporation		
	_	•		
	_	ng or equity securities of a corporation		
	No. None of the above applies. Go to	Part 12.		
		III in the details below for each business		
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement t	o anyone about your business? Incl	ude all financial
	■ No			
	☐ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Pai	t 12: Sign Below			
are with	ve read the answers on this Statement of Fi true and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, o	or obtaining money or property by fra	
	Edward L. Johnson	/s/ Thelma A. Johnson		
	ward L. Johnson nature of Debtor 1	Thelma A. Johnson Signature of Debtor 2		
Dat		Date February 4, 2020		
			"line for Donley when Official Form 4	07\0
	you attach additional pages to <i>Your Statem</i>	iem oi rinanciai Aliairs for Individuals F	ning for bankruptcy (Official Form 1	uiji
_	you pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?	
	lo es. Name of Person Attach the <i>Bankr</i>	runtov Potition Propararia Nation Poolaratia	on and Signature (Official Form 140)	
		ment of Financial Affairs for Individuals Filing		page 7
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Case 1:20-bk-00397-HWV Doc 1 Filed 02/04/20 Entered 02/04/20 16:51:34 Desc Main Document Page 43 of 57

Fill in this infor	mation to identify your	case:		
Debtor 1	Edward L. Johns	on		
	First Name	Middle Name	Last Name	
Debtor 2	Thelma A. Johns	on		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Individu	ials Filing Under (Chapter 7 12/15
If vou are an ind	lividual filing under cha	pter 7, you must fill out t	his form if:	

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Ally Financial name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2019 Kia Sportage 6000 miles property securing debt:	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
Creditor's Fulton Bank N.a	■ Surrender the property.	 □ No
Description of Open Range property Open Range Camper Being	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
securing debt: Repossed 2/4/20		-
Creditor's Northwest Bank name:	Surrender the property.Retain the property and redeem it.	□ No
Description of property Automobile Voluntary Turned In Sept/Oct 2019	☐ Retain the property and enter into a Reaffirmation Agreement.☐ Retain the property and [explain]:	■ Yes

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Official Form 108

Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 2	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedu in the information below. Do not list real estate leases. Unexpired lea You may assume an unexpired personal property lease if the trustee	ale G: Executory Contracts and Unexpired Leases (Official Form 106G), fill asses are leases that are still in effect; the lease period has not yet ended. e does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X /s/ Edward L. Johnson	X /s/ Thelma A. Johnson
Edward L. Johnson Signature of Debtor 1	Thelma A. Johnson Signature of Debtor 2
Date February 4, 2020	Date February 4, 2020

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill i	n this information to identify your case:			Ch	neck or	ne box only as o	lirected in	this form and in	Form
Deb	tor 1 Edward L. Johnson				22A-1S				
1	tor 2 Use, if filing) Thelma A. Johnson				■ 1. 7	here is no pres	umption c	of abuse	
	ed States Bankruptcy Court for the: Middle District of	Penns	sylvania				nade unde	ne if a presumpti er <i>Chapter 7 Mea</i> 122A-2).	
(if kno	e number 				□ 3. 1	he Means Test	does not	apply now becau	
						eck if this is a			
Off	ficial Form 122A - 1							-	
Ch	apter 7 Statement of Your Cu	rrer	nt Mo	nthly Inc	com	е			12/19
attacl case qualif	<u> </u>	which tom a propertion for	the additio	nal information of abuse becar	applies	. On the top of a do not have pri	ny addition marily con	nal pages, write yo sumer debts or be	our name and ecause of
1.	What is your marital and filing status? Check one o	nly.							
	Not married. Fill out Column A, lines 2-11.								
	Married and your spouse is filing with you. Fill o			,	3 2-11.				
	Married and your spouse is NOT filing with you.		•	•					
	Living in the same household and are not leg	-	•			•		. 46:- 6	-1
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally	separate	d under nonbai	nkrupto	y law that appli	es or that		
10 th	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tota bouses own the same rental property, put the income from that	nonth p Il by 6. I	period would Fill in the re	d be March 1 thro sult. Do not inclu	ough Au ide any	gust 31. If the ame income amount m	ount of your	r monthly income vance. For example, if	aried during f both
					Colui Debt		Column Debtor non-fili		
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).			•	\$	1,743.55	\$	0.00	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	paym	nents from	a spouse if	\$	0.00	\$	0.00	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	t. Inclu d, you	ide regula r depende	r contributions ents, parents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,	or fai	rm						
				otor 1					
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00	Camus bana	ф.	0.00	c	0.00	
	Net monthly income from a business, profession, or fail	m \$	0.00	Copy here ->	>	0.00	\$	0.00	
6.	Net income from rental and other real property		Del	otor 1					
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	- \$	0.00						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00 Copy here -> \$

0.00

0.00

page 1

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	fit under					
	For you \$	0.	.00					
	For your spouse \$	0.	.00					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as stand include any compensation, pension, pay, annuity, ounited States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process to the service of the uniformed service pay paid under chapter 61 of title 10, then include that process of the service of the se	ated in the next senter allowance paid by the y, combat-related injucts. If you received an eary only to the extent would otherwise be eary.	ence, do le lry or y retired that it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Streceived as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disability disability or death of a member of the uniformed continuous.	lecurity Act; payments nanity, or internationa nuity, or allowance pai y, combat-related inju	or I or d by the Iry or					
	disability, or death of a member of the uniformed servic sources on a separate page and put the total below.	es. If necessary, list o	tner					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	1,743.55	+ \$	0.00	= \$	1,743.55
Part	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.						incom	•
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$	1,743.55
	Multiply by 12 (the number of months in a year)						X	2
	12b. The result is your annual income for this part of the	e form				12b	p. \$	20,922.60
13.	Calculate the median family income that applies to	ou. Follow these ste	ps:					
	Fill in the state in which you live.	PA						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s		n the separa		13. tions	\$	66,338.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Of Go to Part 3. Do NOT fill out or file Official		neck box	1, There is	no presum	ption of abus	se.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.		2, The pre	esumption o	f abuse is	determined b	y Form 12	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information o	n this sta	tement and	in any atta	achments is t	rue and c	orrect.
	χ /s/ Edward L. Johnson	X	/s/ Theli	ma A. Joh	nson			
	Edward L. Johnson Signature of Debtor 1			A. Johnson				

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1 Debtor 2	Edward L. Johnson Thelma A. Johnson	Case number (if known)
Da	Tebruary 4, 2020 MM / DD / YYYY	Date February 4, 2020 MM / DD / YYYY
	, == ,	,,

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1

Debtor 2

Income for the Period 08/01/2019 to 01/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dover Area School District

Income by Month:

6 Months Ago:	08/2019	\$0.00
5 Months Ago:	09/2019	\$0.00
4 Months Ago:	10/2019	\$300.76
3 Months Ago:	11/2019	\$1,078.51
2 Months Ago:	12/2019	\$1,139.07
Last Month:	01/2020	\$1,452.96
	Average per month:	\$661.88

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: United Defense Northern Trust

Constant income of \$1,081.67 per month.

Non-CMI - Social Security Act Income

Source of Income: Social Security Income

Income by Month:

6 Months Ago:	08/2019	\$2,118.00
5 Months Ago:	09/2019	\$2,118.00
4 Months Ago:	10/2019	\$2,118.00
3 Months Ago:	11/2019	\$2,118.00
2 Months Ago:	12/2019	\$2,118.00
Last Month:	01/2020	\$2,144.00
	Average per month:	\$2,122.33

ebtor 1	Edward L. Johnson		
	Thelma A. Johnson	Case number (if known)	

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 08/01/2019 to 01/31/2020.

Non-CMI - Social Security Act Income

Source of Income: Social Security Income

Income by Month:

6 Months Ago:	08/2019	\$657.00
5 Months Ago:	09/2019	\$657.00
4 Months Ago:	10/2019	\$657.00
3 Months Ago:	11/2019	\$657.00
2 Months Ago:	12/2019	\$657.00
Last Month:	01/2020	\$661.00
	Average per month:	\$657.67

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Middle District of Pennsylvania

In re	Edward L. Johnson Thelma A. Johnson		Case No.	
111.10	Thema A. Johnson	Debtor(s)	Chapter	7
	DISCLOSUDE OF COMP	ENGATION OF ATTOD	NEV EOD DE	PTOD(C)
	DISCLOSURE OF COMP			. ,
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the figerendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	0.00
	Prior to the filing of this statement I have received	ed	\$	0.00
	Balance Due		\$	0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4 . ■	I have not agreed to share the above-disclosed con	mpensation with any other person u	unless they are mem	pers and associates of my law firm.
	I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
5. Iı	n return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:
b. c.	Analysis of the debtor's financial situation, and reresponding of the debtor at the meeting of credit (Other provisions as needed) Negotiations with secured creditors to reaffirmation agreements and applications of the debtor at the meeting of credit (Other provisions as needed) Negotiations with secured creditors to reaffirmation agreements and applications (Other provisions)	tatement of affairs and plan which litors and confirmation hearing, an preduce to market value; exe tions as needed; preparation	may be required; d any adjourned hea mption planning;	rings thereof; preparation and filing of
6. B	y agreement with the debtor(s), the above-disclosed Representation of the debtors in any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of nkruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Fe	bruary 4, 2020	/s/ Mark A. Buterb	augh	
Da	ite	Mark A. Buterbau Signature of Attorne		
		Mooney Law	y	
		230 York Street	.4	
		Hanover, PA 1733 (717) 632-4656 Fa		2
		mab@mooney4la		-
		Name of law firm		

United States Bankruptcy Court Middle District of Pennsylvania

In re	Edward L. Johnson Thelma A. Johnson		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify the	nat the attached list of creditors is true and c	correct to the best	of their knowledge.
The ab Date:	, ,	/s/ Edward L. Johnson Edward L. Johnson	correct to the best	of their knowledge.

Thelma A. Johnson Signature of Debtor